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Bib Data Sheet

CONFIRMATION NO. 7587

<b>SERIAL NUMBER</b> 09/988,850	<b>FILING DATE</b> 11/19/2001 <b>RULE</b>	<b>CLASS</b> 436	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 111465-128
<b>APPLICANTS</b> John F. Gordon, Irvine, CA; Susan N. Hupf, Lake Forest, CA; David S. Cohen, Alpharetta, GA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/249,477 11/17/2000 <i>N</i> AND CLAIMS BENEFIT OF 60/252,725 11/22/2000 <i>N</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/18/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 24	<b>TOTAL CLAIMS</b> 7
<b>INDEPENDENT CLAIMS</b> 7				
<b>ADDRESS</b> 23483				
<b>TITLE</b> Methods and apparatus for blood typing with optical bio-disc				
<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	